JUL 15 2008

PTO/SB/21 (01-08) Approved for use through 04/30/2008. OMB 0651-0031

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TRACE	Application Number	10/003,669	
TRANSMITTAL	Filing Date	11/01/2001	
FORM	First Named Inventor	Robert H. Broyles et al.	
	Art Unit	1633	
(to be used for all correspondence after initial filing)	Examiner Name	Q. Janice Li	
5,	Attorney Docket Number	5522 1-649 001	

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	Amendment/Reply After Final After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		Petition Petition to Convert to a Provisional Application Power of Attorney, Revoc Change of Corresponden Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table of		onvert to a pplication orney, Revoca orrespondenc claimer Refund of CD(s)	e Address		of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):			
			Rem	1. sb21 Transmittal Form (1 page); 2. sb06 Patent Application Fee Determination Record (1 page); 3. Amendment and Response (9 pages); and 4. Pre-addressed postcard.							
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/06 (12-04)

Approved for use through 7/31/2006, OMB 0651-0032

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	PATEN	T APPLIC		FEE DETEI te for Form PTC		N RECORD		Applica	10/003,66	
APPLICATION AS FILED – PART I (Column 1) (Column 2) SMALL ENTITY								OTHER THAN OR SMALL ENTITY		
FOR NUMBER FILED			NUMBE	R EXTRA	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c)) N/A				√A	N/A		1	N/A		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))		N/A		1	1/A	N/A			N/A	
ΧA	MINATION FEE FR 1.16(o), (p), or (q))	N/A			√A	N/A		•	N/A	
TOTAL CLAIMS (37 CFR 1.16(i))		0	minus 20 = • 0		0	x 25 =	0	OR	× 50 =	0
INDEPENDENT CLAIMS		0	minus 3		0	x 105 =	0		x 210 =	0
APPLICATION SIZE FEE (37 CFR 1.16(s)) APPLICATION SIZE FEE (38 250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).					ze fee due each ereof. See	125	0		250	0
IUL	TIPLE DEPENDENT	CLAIM PRES	ENT (37 CF	FR 1.16(j))		N/A			N/A	
_	ne difference in colum					TOTAL	0	1	TOTAL	0
¥ -	R	Column 1) CLAIMS EMAINING AFTER MENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDI- TIONAL FEE (\$)		SMALL E	ADDI- TIONA FEE (\$
AE,	Total * (37 CFR 1.16(i))		Minus	**	=	x 25 =	0	OR	x 50 =	0
Š	Independent * (37 CFR 1.16(h))		Minus	***	=	x 105 =	0	OR	x 210 =	0
ш	Application Size Fe	e (37 CFR 1.1	6(s))			125	0]	250	0
Ĭ										
Ä	FIRST PRESENTATIO	N OF MULTIPLE	E DEPENDE	NT CLAIM (37 CF	R 1.16(j))	N/A		OR	N/A	
AME	FIRST PRESENTATIO	N OF MULTIPLE	E DEPENDEI	NT CLAIM (37 CF	R 1.16(j))	N/A TOTAL ADD'L FEE	0	OR OR	N/A TOTAL ADD'L FEE	0
AMENDMEN		Column 1)	E DEPENDE	(Column 2)	(Column 3)	TOTAL	0	1	TOTAL	0
n	((R			(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	TOTAL	O ADDI- TIONAL FEE (\$)	1	TOTAL ADD'L FEE	ADDI- TIONA FEE (\$
מ	((R	Column 1) CLAIMS EMAINING AFTER		(Column 2) HIGHEST NUMBER PREVIOUSLY	(Column 3)	TOTAL ADD'L FEE	ADDI- TIONAL	1	TOTAL ADD'L FEE	ADDI- TIONA
מ	((R All	Column 1) CLAIMS EMAINING AFTER MENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	TOTAL ADD'L FEE RATE (\$)	ADDI- TIONAL FEE (\$)	OR	TOTAL ADD'L FEE RATE (\$)	ADDI- TIONA FEE (\$ 0
MENDMEN B	(() R AN Total (37 CFR 1.16())) Independent	Column 1) CLAIMS EMAINING AFTER MENDMENT 5	Minus Minus	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR " 37	(Column 3) PRESENT EXTRA = 0	TOTAL ADD'L FEE RATE (\$) x 25 =	ADDI- TIONAL FEE (\$)	OR	TOTAL ADD'L FEE RATE (\$) x 50 =	ADDI- TIONA FEE (\$
	((CA) Total (37 CFR 1.16(1)) Independent (37 CFR 1.16(1))	Column 1) CLAIMS EMAINING AFTER MENDMENT 5 1 e (37 CFR 1.1	Minus Minus 6(s))	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR " 37	(Column 3) PRESENT EXTRA = 0 = 0	TOTAL ADD'L FEE RATE (\$) x 25 = x 105 =	ADDI- TIONAL FEE (\$)	OR	TOTAL ADD'L FEE RATE (\$) x 50 = x 210 =	ADDI- TIONA FEE (\$ 0

"" If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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